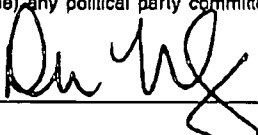


24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

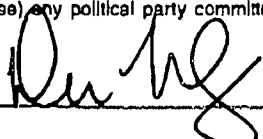
PAGE 1 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) DSCC		FEC IDENTIFICATION NUMBER C00042386	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			
Full Name of Payee Great American Media		Date of Public Distribution/Dissemination 10 / 11 / 2016	
Mailing Address 3050 K SL NW Suite 100		Amount 1406185.72	
City Washington	State DC	Zip Code 20007	Transaction ID : SE-124084
Purpose of Expenditure Media Buy	Category/ Type	Date of Disbursement or Obligation 10 / 06 / 2016	
Name of Federal Candidate Ayotte, Kelly, .		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify)	
5745846.52			
Full Name of Payee Great American Media		Date of Public Distribution/Dissemination 10 / 11 / 2016	
Mailing Address 3050 K SL NW Suite 100		Amount 70633.43	
City Washington	State DC	Zip Code 20007	Transaction ID : SE-124272
Purpose of Expenditure Media Buy	Category/ Type	Date of Disbursement or Obligation 10 / 08 / 2016	
Name of Federal Candidate Hassan, Margaret, Wood, .		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify)	
5745846.52			
(a) SUBTOTAL of Itemized Independent Expenditures.....		1478819.15	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures.....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature 		Date 10 / 13 / 2016	

FEC Schedule E (Form 24/28) Rev. 09/2013

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

PAGE 2 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) DSCC		FEC IDENTIFICATION NUMBER C00042366	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	
Full Name of Payee Grunwald Communications		Date of Public Distribution/Dissemination 10 / 11 / 2016	
Mailing Address 1306 30th Street, N.W.		Amount 13937.60	
City Washington	State DC	Zip Code 20007	Transaction ID: SE-124258
Purpose of Expenditure Media Production		Category/Type	Date of Disbursement or Obligation 10 / 11 / 2016
Name of Federal Candidate Ayotte, Kelly, . .		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought 5745948.62		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Full Name of Payee Grunwald Communications		Date of Public Distribution/Dissemination 10 / 11 / 2016	
Mailing Address 1306 30th Street, N.W.		Amount 4293.68	
City Washington	State DC	Zip Code 20007	Transaction ID: SE-124264
Purpose of Expenditure Media Production		Category/Type	Date of Disbursement or Obligation 08 / 23 / 2016
Name of Federal Candidate Ayotte, Kelly, . .		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought 5745948.62		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		18231.28	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures.....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature 		Date 10 / 13 / 2016	

FEC Schedule E (Form 24/28) Rev. 09/2013

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (in Full) DSCC	FEC IDENTIFICATION NUMBER C00042366
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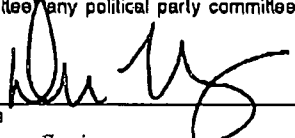
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

Full Name of Payee Grunwald Communications		Date of Public Distribution/Dissemination 10 / 11 / 2016	
Mailing Address 1306 30th Street, N.W.		Amount 8599.48	
City Washington	State DC	Zip Code 20007	Transaction ID : SE-124266
Purpose of Expenditure Media Production	Category/ Type	Date of Disbursement or Obligation 08 / 30 / 2016	
Name of Federal Candidate Ayotte, Kelly, ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate	District: 00 State: NH
Calendar Year-To-Date Per Election for Office Sought 5745946.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee		Date of Public Distribution/Dissemination	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation
Purpose of Expenditure	Category/ Type		
Name of Federal Candidate	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate	District: State:
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	8599.48
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	1503649.89

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature  Date 10 / 13 / 2016

Via FAX

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